2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 JUL -8 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000133583

1. Entity Name
TRAVEL EXPRESS INVESTMENT, INC.

800021464238
07/10/03--01060--029 **61.25

☒ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
1113 NORTH PINE HILLS RD. ORLANDO, FL 32808	1113 NORTH PINE HILLS RD. ORLANDO, FL 32808

2. Principal Place of Business	3. Mailing Address
407 Center Pointe Circle	407 Center Pointe Circle
Suite, Apt. #, etc. Suite 1637	Suite, Apt. #, etc. Suite 1637
City & State Altamonte Springs, FL	City & State Altamonte Springs, FL
Zip: 32701 Country:	Zip: 32701 Country:

4. FEI Number: 20-0046435 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145	Name: Philip K. Calandrino, P.A. Street Address (P.O. Box Number is Not Acceptable) 29 E. Pine Street City: Orlando FL Zip Code: 32801

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Philip K. Calandrino 6-20-03
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD ALI, SOHAIL 1113 NORTH PINE HILLS RD. ORLANDO, FL 32808	☐ Delete	D RAJAN, ARIF 407 Center Pointe Cir., Ste 1637, Altamonte Springs, FL 32701	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	P ~~ALI, AMIN~~ Rajan, Arif 407 Center Pointe Cir., Ste 1637, Altamonte Springs, FL 32701	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VP RAJAN, GULZAR 407 Center Pointe Cir., Ste 1637, Altamonte Springs, FL 32701	☒ Change ☒ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 6/19/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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